**Health and Safety at Work**

**Action Plan - Draft**

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| Standard | What we should have | Current Status | Actions | Owner | Date | Status |
| Employers have effective health and safety policies in place that set a clear direction for the organisation to follow and the organisation should have planned how to implement these policies. | The board sets priorities and develops performance standards to comply with legislation and improve standards. | We have no Board developed priorities or performance standards  Limited reporting to Board.  Committee in place and is well attended but seniority of attendees needs to be reassessed.  Policies in place but not embedded. | Establish a plan with clear measurable objectives relating to all aspects of health and safety.  Review reporting route to ensure that senior managers are aware of h&s concerns and of actions being taken to reduce/prevent reoccurrence.  Develop weekly highlight report for OMT and Exec. (linking with TOBI)  Review and update TOR and membership of the Health and Safety Committee  Ensure that our policies are reacting to and supporting how we manage hazards. | Claire Dalley  Claire Dalley  Christina Foster  Claire Dalley  Phil Rose | 31st July 2021  30th June 2021  May 2021  30 June 2021  31 July 2021 | Delayed.  Complete. H&S Committee reporting route changed to PLC (board committee); agreed at Board that a regular report will be issued.  Complete  Complete in part. TOR updated. Request for Service Director to review attendees and identify senior reps emailed on 24/05/21,Attendees discussed at OMT 14/06/21, and 130/09/21  Current policies reviewed and updated. Approved at September 2021 H&S Committee. To be submitted to PLC for approval prior to publication.  Review has been undertaken to identify possible gaps in documentation and plan is in place to develop additional documents by end November 2021. |
| Roles and responsibilities for health and safety are set out in job descriptions. | H&S is included in job description | Review – Job descriptions need to have details of H&S responsibilities relating to the position – specific not catch all  Restructure to create H&S management rather than advisor “approach” on the centralised team. | Phil Rose/Roger Perez  Claire Dalley | 30 Sept 2021  30 August 2021 | Not yet started  Senior expert recruited for temporary position to develop and improve function. Proposed structure and establishment developed. Additional funding is required. |
| Everyone must clearly understand their responsibilities and have the appropriate time and resources to discharge them effectively. | H&S training delivered as part of PSST.  Training is not specific.  Training is classroom based – makes it difficult to attend for clinical staff  Responsibilities are not always clear to managers  Lack of resources to support health and safety across the organisation | Develop matrix showing responsibilities of managers/staff at all levels. – and define what specific support/training packages should be developed  Develop a training package all aspects and all seniority  Need to cover some specific items as well as general responsibilities:-   * How to do a risk assessment * How to decide what needs a risk assessment   Bite site bits  Webinars  Videos  Manager’s handbook, for heads of service and team leaders to be developed – handbooks to be specific to the appropriate level.  Staff handbook detailing staff responsibilities as employees under h&S legislation  Establish appropriate resources in place. | Claire Dalley  Roger Perez  Phil Rose  Phil Rose  Phil Rose  Roger Perez | 30 June 2021  31 December 2021  30 June 2021  31st July 2021  31st July 2021  30th September 2021 | Complete, and shared with OMT via email 25/05/21  Complete. Training needs and suggested approach set out in report. Funding required.  Complete. Draft procedure and training developed for review. and discussed and agreed at H&S Committee.  However, since this time it has been decided that this training should be incorporated into the wider training approach referred to above  Ongoing. Handbook in place but requires improvement to make it specification managers (more like a basic suite of SOPs/Guidance.  Ongoing: As above  Temporary senior expert resources recruited, and resource requirements identified and set out in report. Funding required |
| Employers ensure they have systems and arrangements in place to secure the competence of all staff. | The organisation has arrangements to assess the level of competence required and ensure that it is in place. | Training records are in place – this does not however assess competency | Ensure that training measures competency as appropriate. | Roger Perez | 30th September 2021 | Training proposed provides certification. |
| Board members and senior managers are sufficiently trained to ensure their competence with respect to their health and safety responsibilities. | Trust Board training undertaken. | As noted above – specific training and support to be developed |  |  | REFER TO ACTION DATES ABOVE RE TRAINING |
| Employees receive appropriate information and training in health and safety. | As above | Refer to comments above re training |  |  | REFER TO ACTION DATES ABOVE RE TRAINING |
| Employers ensure that it has a documented process to audit and review the health and safety management system. | The organisation uses the review process to establish priorities  for improving health and safety performance. | Internal audit if requested by audit committee | Appoint external expert to carry out regular review of systems and procedures (Authorising Engineer) | Claire Dalley/ Phil Rose | 30th June 2021 | Internal audit undertaken, Audit Complete; review by external expert also undertaken. |
| Employers have effective arrangements in place to ensure staff are aware of risks relating to their roles |  |  | Creation of role specific risk assessments will include risks of manual handling as appropriate | Roger Perez/Phil Rose | 31st December 2021 | List of roles identified. Draft RA’s to be developed. |
| Employers have effective arrangements in place to manage manual handling risks | Arrangements are in place to assess the competence of staff and deliver any necessary training. | External provider used at moment, via L&D | Review requirements for manual handling training, and determine if improved approach can be developed – site based, train the trainer etc | Roger Perez/ Phil Rose | 30th September 2021 | Ongoing. Working with L&D. |
| Employers have effective arrangements in place to manage violence and aggression risks. (This standard should be cross referenced with NHS Protect Standards for Providers: Security Management). | The organisation has current policies and procedures to manage the risks from challenging behaviour. | Zero Tolerance Policy in place – This is our policy.- our position as a Trust.  Concerns that no actions taken against patients. OSWB directorate launched a Zero Tolerance Group with Thames Valley Policy to encourage staff to take action and police to support. | Launch Violence and Aggression Task force to report into H&S Committee.  Launch and extend the excellent Zero Tolerance work undertaken in OSWB MH directorate.  Develop reporting system to ensure senior managers are aware of violence and aggression incidents and trends.  Appropriate resource to support staff, link in with police. | Roger Perez  Roger Perez  Phil Rose | 31st July 2021  30th September 2021  May 2021 | Agreed at the May H&S committee that a sub-group focusing on violence and aggression would be a good idea. Awaiting resource to start to implement.  Not yet started.  Complete – included in weekly report. |
| Employers have effective arrangements in place to manage violence and aggression risks. (This standard should be cross referenced with NHS Protect Standards for Providers: Security Management). | Suitable and sufficient risk assessments have been carried out considering, staff groups and activities, patients and visitors and the environment they operate in.  These risks are reflected in the corporate and local risk register | Risk assessments are not widely undertaken.  No risk assessment framework | Refer to above:-  Ensuring responsibilities understood  Training is suitable  Establish organisational risk assessments as appropriate – requiring localised addition (many of the key hazard management approaches will be set by policy)  Undertake audits to ensure assessments are in place and quality of assessments is acceptable.  Support managers to undertake risk assessments.  Ensure appropriate resources are in Place | Roger Perez  Roger Perez  Roger Perez | 30th September 2021  30th September 2021  30th September 2021 | SEE ACTION DATE ABOVE RE TRAINING  Suite of templates created and will be stored in central file for use by all.  Delayed due to lack of resources.  SEE ACTION ABOVE RE TRAINING AND ALSO TEMPLATES  Resource requirements identified; funding required |
| Arrangements are in place to effectively manage the risks to lone workers. | Suitable and sufficient risk assessments have been carried out considering all lone working staff, including those that work in premises not owned by the trust (e.g. other NHS employers/ local authorities/private companies). | Policy in place | Refer to above:-  Ensuring responsibilities understood  Training is suitable  Ensure resources in place to develop and instigate appropriate plans.  Develop lone working management approach  Safe home working approach is required | Roger Perez  Phil Rose  Phil Rose | 30th September 2021  31st October 2021  31st October 2021 | SEE ACTION RE TRAINING ABOVE,  AND TEMPLATES ABOVE  Resource requirements identified; funding required  Trial of a lone worker safety system is ongoing  Draft RA developed. Issues to Service Directors for implementation across the Trust 16.09.21.  H&S have fed into the flexible working policy |
| Employers have effective arrangements to manage the risks to staff from being bullied or harassed by patients, other staff, or their managers | Patients and their family and friends are made fully aware of the standards of conduct expected of them and  of the sanctions that may follow unacceptable behaviour. | **Patients and Visitors**  Zero tolerance group is working on posters.  **Staf**f  Grievance Policy and disciplinary policy in place | **Patients and Visitors**  Posters to be procured.  Look at the patient welcome pack to see if information can be provided in this re how our staff should be treated.  (Include in Carer pack?)  Regular reporting, trend reviews to set action plans  Resource to investigate and support staff  **Staff**  Reporting is in place - link in with HR regarding trends and actions taken as a result | Phil Rose  Phil Rose  Phil Rose  Roger Perez  Roger Perez | 31st July 2021  30th August 2021  30th August 2021  30th September 2021  30 September 2021 | Not progressed due to resource pressures  Not progressed due to resource pressures  Included in weekly reports  Resource requirements identified; funding required  Not progressed due to resource pressures |
| Employers ensure work equipment (including medical devices) is suitable for the purpose for which it is sed. | The policy includes arrangements to ensure work equipment and medical devices purchased by the organisation are suitable and fit for purpose. | Medical Devices is the responsibility of the Corporate Governance team.  Estate’s equipment – toolbox talks in place | Office furniture – develop a standard that can be procured that meets regulations – work with procurement.  Laptops – Work with IT to ensure that associated equipment for laptops is ordered at the same time (or opted out of)  Desktops – Develop process to work with It to ensure that desktops have appropriate height adjustment stands  Pool cars – ensure that pol car policy is up to date, and ensure that responsibilities are set out in H&S handbooks  N/A | Phil Rose  Phil Rose  Phil Rose  Christina Foster  Phil Rose | 30th September 2021  30th September 2021  30th September 2021  31st July 2021  31st July 2021 | Not progressed due to resource pressures  Not progressed due to resource pressures  Not progressed due to resource pressures  Not progressed due to resource pressures  Not progressed due to resource pressures |
| Employers ensure work equipment (including medical devices) is suitable for the purpose for which it is used. | Employees who use work equipment are competent in its safe use. | Medical Devices is the responsibility of the Corporate Governance team.  Estate’s equipment – toolbox talks in place | Review DSE assessment – ensure also covers use of basic office equipment. | Phil Rose | 31st July 2021 | DSE is now part of mandatory training |
| Employers have effective arrangements in place to manage the risks from the use of display screen equipment. | There is regular monitoring of compliance with the DSE policies and procedures. | DSE – redesigned risk assessment form. Made it more interactive and interesting on the intranet. | Refer to the DSE assessment in the H&S handbooks.  Update DSE assessment to reflect “hunt and peck” typists.  Ensure managers are aware that they are empowered to order equipment identified as required by DSE.  Spot check audits – establish programme. | Phil Rose  Phil Rose  Phil Rose  Phil Rose | 31st July 2021  31st July 2021  31st July 2021  31st July 2021 | Complete  Not yet started  Complete  DSE is now part of online mandatory training and so is centrally recorded and can be monitored by managers |

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| Employers have effective arrangements in place to manage the risks from driving at work. | There is regular monitoring of compliance with the Driving at Work Policies and Procedures | Policy in place re using personal cars for work | Strengthen procedures to ensure that checks are in place re the use of personal cars for work | Roger Perez | 31 December 2021 | Not yet commenced |